BOOKING FORM

(This form can also be accessed from our website: **www.bathmozartfest.org.uk**)

NAME _____

ADDRESS _____

_____

POSTCODE _____ TEL (DAY) _____

EMAIL _____

Payment Details

I enclose a cheque/P.O. (payable to Bath Box Office) for a maximum of £ _____

If you wish to pay by Mastercard/Maestro/Visa Credit or Debit, please tick the box below and supply a phone number where a member of the Box Office can contact you for your card details. **Please note that all Box Office transactions (counter, phone, post and web) will now be subject to a £1 booking fee.**

☐ Telephone _____

Event Code	Date	No of seats	Seat Price 1st choice	Seat Price 2nd choice	Offer Price	Total	Box Office use only
Souvenir Programme £6 per voucher. No. of vouchers ____			**Box Office Transaction Fee: £1.00**		**Ticket Postage £1.00** (if s.a.e. not enclosed)		
Facilities for the disabled Please discuss your requirements with the Box Office staff who will be happy to advise you.					**TOTAL £**		

Please return this form with s.a.e. and your payment to:
Bath Box Office, Bath Visitor Information Centre, Bridgwater House, 2 Terrace Walk, Bath BA1 1LN. Tel: 01225 463362 Email: bathboxoffice@bathtourism.co.uk

Contact Preferences: ☐ **I would like to receive contact by email** ☐ **I would like to receive contact by post** ☐ **I would like to receive information about Bath Mozartfest** ☐ **Bath Bachfest**

Please tick. We cannot contact you without your permission (General Data Protection Regulation 2018).